

Student Name: _____

Individual Data Sheet

Legal Name _____

(first)

(middle)

(last)

Address _____

Gender _____ Nicknames/ name changes _____

Date of birth _____ Place of birth _____

Date of death _____ Place of death _____

Occupation _____ Religion _____

Date of Marriage _____

Father's Name _____

(first)

(middle)

(last)

Mother's Name _____

(first)

(middle)

(last)

Siblings (list in birth order):

Children (list in birth order):

Other residents in household:

Name	Possible relationship	Cite evidence to support your answer
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____